



HEALTH PROFILE: NICARAGUA

HIV/AIDS

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| Estimated Number of Adults and Children Living with HIV/AIDS (end 2003) | 6,400 (low-high estimates 3,100–12,000) |
| Total Population (2004) | 5,597,000 |
| Adult HIV Prevalence (end 2003) | 0.2% (low-high estimates 0.1–0.3%) |

Source: UNAIDS

Nicaragua continues to report the lowest HIV prevalence in Central America. Although the reported data on HIV/AIDS in Nicaragua may not be complete, the Joint United Nations Programme on HIV/AIDS (UNAIDS) estimated that by the end of 2003 approximately 6,400 adults and children were living with HIV/AIDS, yielding an adult prevalence of 0.2%. Even though Nicaragua has a relatively low incidence of HIV, infection rates among women are growing. Housewives are increasingly affected, and over 60% of people living with HIV/AIDS are between the ages of 15 and 34. These trends suggest the potential for a more serious epidemic.

Nicaragua's epidemic is spread primarily through sexual activity. As of 2002, 65% of reported cases were transmitted through heterosexual intercourse, and 34% were transmitted via men who have sex with men. Experts consider, however, that heterosexual transmission is overreported and transmission via men who have sex with men underreported.

While prevalence remains relatively low in the population as a whole, it is increasing among the most vulnerable populations. HIV surveillance among injecting drug users in Managua in the mid-1990s reported prevalence of 6.0%. According to the United States Bureau of the Census, a study among prisoners in Managua in 1998 reported a prevalence of 4.6%. A 2002 multisite study on HIV prevalence among vulnerable populations in Central America found a prevalence of 9.3% among men who have sex with men. The same study uncovered relatively low infection rates (0.4%) among commercial sex workers. HIV prevalence among pregnant women attending antenatal clinics was 0.5%.

Several preconditions for the further spread of HIV in Nicaragua are present. Early initiation of sexual activity, coupled with low levels of condom use among young people, could lead to an escalation of the country's epidemic. High levels of population migration over the last two decades, resulting from the confluence of war in the 1980s, socioeconomic crisis in the 1990s, and natural disasters, also threaten to hasten the spread of the epidemic. Another disturbing trend is that wives of men who engage in risky behavior are themselves increasingly vulnerable. According to one study, the risk of infection among housewives in Chinandaga is twice that of commercial sex workers.

As of July 2004, 17 infected people were receiving antiretroviral treatment. Official data indicate that 43 people are currently receiving treatment, and the goal is to reach 100 people with antiretroviral treatment by February

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2005, through the funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria.

NATIONAL RESPONSE

UNAIDS contends that Nicaragua will need strong support to avoid acceleration of the national infection rates. Although the country's overall poverty eradication strategy recognizes that HIV/AIDS is an important future threat, national expenditures on health and the funding support available from both national and external sources have steadily declined. Advocacy for higher political commitment from executive and legislative bodies is greatly needed.

Nicaragua's National Program for the Prevention and Control of HIV/AIDS and Sexually Transmitted Infections (STI) was established in 1998. Although part of the Ministry of Health, it is decentralized in its operations, with local health care systems coordinating HIV/STI prevention, control, and education with regional hospitals, primary care health centers, and health posts. The current (2000–2004) national strategic plan was developed in collaboration with civil society groups, people living with HIV/AIDS, government institutions, and international organizations. Priority activities include:

- Prevention among mobile populations and other vulnerable populations, including men who have sex with men, commercial sex workers, and injecting drug users
- Integrated management of care for persons living with HIV/AIDS
- Improved national epidemiologic surveillance
- Attention to crosscutting issues such as human rights, gender, ethics, behavior change communications, and decentralization of services

The Government of Nicaragua was approved for funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria in the second round. The objectives of Nicaragua's HIV/AIDS proposal are grounded in the country's National Strategic Plan and include: containing the HIV/AIDS epidemic; reducing the risk of infection in priority populations and areas; and increasing survival among those living with HIV/AIDS.

Nicaragua is beginning to address access to treatment for people living with HIV/AIDS, and the Ministry of Health has indicated that improving the availability of antiretroviral prophylaxis to prevent mother-to-child transmission and drugs to treat opportunistic infections is essential. Although the Nicaraguan government passed a very progressive law (Law 238) to protect people living with HIV/AIDS against discrimination, it has yet to implement this legislation. Law 238 would, in effect, guarantee access to treatment for those living with the disease. Nicaragua is currently one of the few Latin American countries where appropriate antiretroviral therapy is available to only a select few and is out of reach for the vast majority of those who need it. Lack of access to treatment, stigma, and marginalization are the most frequent complaints of people living with HIV/AIDS in Nicaragua.

Other areas that must be improved in order to avoid a more serious epidemic include high-level political commitment, epidemiological surveillance, training for health service providers, and HIV counseling and testing services.

USAID SUPPORT

The United States Agency for International Development (USAID) allocated \$500,000 toward HIV/AIDS prevention activities in Nicaragua in FY 2003. The goal of USAID's HIV/AIDS program in Nicaragua is to prevent the development of a generalized epidemic. USAID-supported interventions are focused on key vulnerable populations, including men who have

sex with men, commercial sex workers, adolescents, and young adults. Programs aim to expand the availability and usage of condoms, reduce high-risk sexual behavior, and increase detection of sexually transmitted infections.

The bulk of USAID's effort in Nicaragua, however, is not in its country HIV/AIDS program but in its regional HIV/AIDS program, which provides combined support to seven Central American countries. USAID's Central American HIV/AIDS program has supported activities in the region since the mid-1990s, focusing on areas and at-risk populations not normally covered by bilateral programs. Primary goals of the program are: policy formulation, advocacy, information dissemination, and evaluation of the national strategic plans. Another important goal is to strengthen existing human rights legal services that work in HIV/AIDS-related content areas to help people living with HIV/AIDS and other vulnerable groups under existing legislation. The program also supports activities to strengthen the capacity of Central American organizations to deliver HIV/AIDS services and information to specific vulnerable groups, and has developed a condom social marketing strategy to reduce risky behavior in these vulnerable populations. USAID allocated \$4.9 million for regional HIV/AIDS activities in FY 2003; some of these funds were used to support activities in Nicaragua.

Specific HIV/AIDS activities funded by USAID in Nicaragua include:

Behavior Change Communication

The Mission has devoted resources toward the development of a behavior change communications strategy that will provide a framework for mobilizing public, private, and international donor assistance.

Capacity Building

USAID-supported programs in Nicaragua provide technical assistance to nongovernmental organizations in the areas of institutional strengthening, advocacy, and social marketing. The Mission will also work to strengthen the Country Coordinating Mechanism of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Condoms

Condom provision to the National AIDS Control Program and to nongovernmental organizations is a central component of USAID's HIV/AIDS activities in Nicaragua. USAID supported the launch of the Bodyguard condom in April 2000. Annual sales of Bodyguard and the regional brand Vive increased from 500,000 in 2000 to more than 2.4 million in 2001, and 3.1 million in 2003. Both condom brands are part of an innovative "double protection" marketing program that encourages users to protect themselves both from pregnancy and sexually transmitted infections. U.S. media, including *Newsweek*, have recognized the model.

Counseling and Testing

USAID/Nicaragua works to bolster the ability of public-sector facilities to offer HIV counseling and testing services. In FY 2001, public sector facilities that offer counseling and testing for sexually transmitted infections and HIV among their services increased from 70% to 93%.

IMPORTANT LINKS AND CONTACTS

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USAID HIV/AIDS Website, Nicaragua:

http://www.usaid.gov/our_work/global_health/aids/Countries/lac/nicaragua.html

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For more information, see http://www.usaid.gov/our_work/global_health/aids